GPRA 101: Intro to GPRA & Clinical Reporting System (CRS)

Providers' Best Practices & GPRA Measures Medical Conference

May 21, 2014

Agenda

1) Intro to GPRA
2) GPRA Measure Logic (all 22 GPRA measures)
3) GPRA Targets
4) GPRA Resources and Trainings
5) Clinical Reporting System (CRS) Demo: GPRA Reports, Patient Lists & Taxonomies
6) GPRA Improvement Strategies (Time Permitting)

Intro to GPRA/GPRAMA

- **GPRA**: Government Performance and Results Act
  - Federal law passed in 1993 that requires agencies to demonstrate that they are using congressional funds effectively and efficiently
  - IHS has been reporting GPRA data for over 10 years
- **GPRAMA**: Government Performance and Results Act Modernization Act of 2010
  - Update to the Government Performance and Results Act of 1993
  - Requires federal agencies to use performance data to drive decision making
  - IHS began reporting GPRAMA in FY 2013
  - Smaller set of measures than GPRA

FY 2014 GPRA/GPRAMA measures

22 Clinical GPRAMA/GPRA (Budget) Measures – GPRAMA measures in red

- Diabetes (5 measures):
  - Good Glycemic Control
  - Controlled BP <140/90
  - LDL Assessed
  - Nephropathy Assessed
  - Retinopathy Exam
- Dental (3 measures):
  - Access to Dental Services
  - Sealants
  - Fluorides
- Immunizations (3 measures):
  - Influenza 65+
  - Pneumovax 65+
  - Childhood Immunizations
- Cancer Screening (3 measures):
  - Pap Smear Rates
  - Mammogram Rates
  - Colorectal Cancer Screening
- Behavioral Health (3 measures):
  - Alcohol Screening
  - DV/IPV Screening
  - Depression Screening
- Prevention Measures (5 measures):
  - Tobacco Cessation
  - Prenatal HIV Screening
  - Comp. CVD Assessment
  - Childhood Weight Control*
  - Breastfeeding Rates
  - Controlling High Blood Pressure-Million Hearts

*Childhood Weight Control is a long term measure that was reported in FY 2013, next reported in FY 2016

Intro to GPRA/GPRAMA

- Clinical GPRA/GPRAMA data
  - Collected and reported three times each GPRA year via the Clinical Reporting System (CRS) package in RPMS
    - GPRA Year: July 1 – June 30
    - Data collected for Q2, Q3, and Q4
    - Data is cumulative
    - CRS data from all reporting clinics are aggregated into national result
- 2014 GPRA/GPRAMA Reporting Deadlines
  - Q2: January 24, 2014
  - Q3: April 25, 2014
  - Q4: July 25, 2014

Important Definitions

- **GPRA User Population**:
  - Must have been seen at least once in the three years prior to the end of the time period, regardless of clinic type, and the visit must be either ambulatory (including day surgery or observation) or a hospitalization; the rest of the service categories are excluded.
  - Must be alive on the last day of the Report Period.
  - Must be AI/AN; defined as Beneficiary 01.
  - Must reside in a community specified in the site's GPRA community taxonomy, defined as all communities of residence in the defined CHS catchment area.

Important Definitions

- **Active Clinical Population:**
  - Must have two face-to-face visits to medical clinics in the past three years. At least one visit must be to a core medical clinic.
  - Must be alive on the last day of the Report Period.
  - Must be AI/AN; defines as Beneficiary 01.
  - Must reside in a community specified in the site's GPRA community taxonomy, defined as all communities of residence in the defined CHS catchment area.

Diabetes: Good Glycemic Control

FY 2014 Measure Logic*:

Numerator:	Patients in Good Glycemic Control: A1c < 8
Denominator:	Active Diabetic Patients

Active Diabetic Patient: Active Clinical patients diagnosed with diabetes (POV 250.00 through 250.93) prior to the report period, and at least two visits in the past year, and two diabetes mellitus-related visits ever.

*Prior to FY 2013, this measure was called “Ideal Glycemic Control” and reported patients with A1c <7

Diabetes: Blood Pressure Control

- FY 2014 Measure Logic*:

Numerator:	Patients with BP less than (<) 140/90, i.e., the mean systolic value is less than (<) 140 and the mean diastolic value is less than (<) 90.
Denominator:	Active Diabetic Patients

*Prior to FY 2013, this measure reported patients with blood pressure <130/80

Diabetes: LDL Assessed

- FY 2014 Measure Logic:

Numerator:	Patients with LDL completed during the report period, regardless of result.
Denominator:	Active Diabetic Patients

Diabetes: Nephropathy Assessment

- FY 2014 Measure Logic:

Numerator:	Patients with nephropathy assessment during report period or diagnosis/treatment of ESRD any time before the end of the report period (Nephropathy Assessment requires an estimated GFR AND a UACR (NOT dipstick) during the report period)
Denominator:	Active Diabetic Patients

Diabetes: Retinopathy Assessment

- FY 2014 Measure Logic:

Numerator:	Patients receiving a qualified retinal evaluation during the report period
Denominator:	Active Diabetic Patients

Dental Access

- FY 2014 Measure Logic:

Numerator:	Patients with a documented dental visit during the report period
Denominator:	User Population patients

Dental: Sealants

- FY 2014 Measure Logic*:

Numerator:	Patients with at least one or more intact dental sealants
Denominator:	User Population patients ages 2 through 15

*Prior to FY 2013 this measure reported a count of the number of sealants placed during the report period

Dental: Topical Fluorides

- FY 2014 Measure Logic*:

Numerator:	Patients who received one or more topical fluoride applications during the report period
Denominator:	GPRA User Population patients age 1 through 15

*Prior to FY 2013 this measure reported a count of the number of patients receiving one or more topical fluoride applications during the report period

Influenza 65+

- FY 2014 Measure Logic:

Numerator:	Patients with influenza vaccine documented during the report period or with a contraindication documented any time before the end of the report period
Denominator:	Active Clinical patients ages 65 and older

Pneumovax 65+

- FY 2014 Measure Logic:

Numerator:	Patients with Pneumococcal vaccine or contraindication documented ever and, if patient is older than 65 years, either a dose of pneumovax after the age of 65 or a dose of pneumovax in the past five years.
Denominator:	Active Clinical patients ages 65 and older

Childhood Immunizations

- FY 2014 Measure Logic:

Numerator:	Patients who have received the 4:3:1:3*:3:1:4 combination, including contraindications and evidence of disease
Denominator:	GPRA User Population patients active in the Immunization Package who are 19 through 35 months at end of report period

- 4:3:1:3*:3:1:4 Series:
  - 4 DTaP
  - 3 Polio
  - 1 MMR
  - 3 or 4 HiB (depending on brand)
  - 3 Hepatitis B
  - 1 Varicella
  - 4 Pneumococcal

Pap (Cervical) Screening

- FY 2014 Measure Logic*:

Numerator:	Patients with a Pap smear documented in the past three years, or if patient is 30 to 64 years of age, either a Pap Smear documented in the past three years or a Pap Smear and an HPV DNA documented in the past five years.
Denominator:	Female Active Clinical patients ages 24 through 64 without a documented history of hysterectomy

*Prior to FY 2013 this measure reported the percentage of women age 21-64 with a Pap screen in the past three years. In FY 2013 this measure reported the percentage of women 25-64 with a Pap screen in the past four years

Mammography Screening

- FY 2014 Measure Logic:

Numerator:	Patients who had a mammogram documented in the past two years
Denominator:	Female Active Clinical patients ages 52 through 64 years, without a documented bilateral mastectomy or two separate unilateral mastectomies

Colorectal Cancer Screening

- FY 2014 Measure Logic*:

Numerator:	Patients who have had any Colorectal Cancer screening defined as any of the following: A. Fecal Occult Blood Test (FOBT) or FIT during the report period B. Flexible sigmoidoscopy in the past 5 years C. Colonoscopy in the past 10 years
Denominator:	Active Clinical Patients ages 50 through 75 without a documented history of colorectal cancer or total colectomy

- Note: Double contrast barium enema no longer counted towards meeting this measure

Tobacco Cessation

- FY 2014 Measure Logic*:

Numerator:	Patients who received tobacco cessation counseling, received a prescription for a tobacco cessation aid, or quit their tobacco use anytime during the Report Period.
Denominator:	Active clinical patients identified as current tobacco users or tobacco users in cessation

Alcohol Screening (FAS Prevention)

- FY 2014 Measure Logic:

Numerator:	Patients screened for alcohol use, had an alcohol-related diagnosis or procedure, or received alcohol-related patient education during the report period
Denominator:	Female Active Clinical patients ages 15-44

Intimate Partner Violence/Domestic Violence (IPV/DV) Screening

- FY 2014 Measure Logic:

Numerator:	Patients screened for intimate partner (domestic) violence any time during the report period
Denominator:	Female Active Clinical patients ages 15-40

Depression Screening

- FY 2014 Measure Logic:

Numerator:	Patients screened for depression or diagnosed with a mood disorder any time during the report period
Denominator:	Active Clinical patients ages 18 and older

Comprehensive CVD Assessment

- FY 2014 Measure Logic:

Numerator:	Patients with comprehensive CVD assessment, defined as having BP, LDL, and tobacco use assessed, BMI calculated, and lifestyle counseling
Denominator:	Active CHD patients* ages 22 and older

- Active CHD Patient*: Active Clinical patients diagnosed with CHD prior to the report period, *and* at least two visits during the report period, *and* two CHD-related visits ever

- **Numerator definitions:**
  - BP documented at least twice in prior two years
  - LDL completed during the report period
  - Tobacco use screening completed during the report period
  - BMI calculated
  - Received any lifestyle adaptation counseling, including medical nutrition counseling, or nutrition, exercise or other lifestyle education during the report period

Prenatal HIV Screening

- FY 2014 Measure Logic:

Numerator:	Patients who were screened for HIV during the past 20 months
Denominator:	All pregnant Active Clinical patients with no documented miscarriage or abortion during the past 20 months and no recorded HIV diagnosis ever

Breastfeeding Rates

- FY 2014 Measure Logic*:

Numerator:	Patients who, at the age of two months (45 through 89 days), were either exclusively or mostly breastfed
Denominator:	Active Clinical patients who are 30 through 394 days old who were screened for infant feeding choice at the age of two months (45 through 89 days)

*Prior to FY 2013 this measure was reported only by federal facilities, Tribal and Urban facilities began reporting data for this measure in 2013

Controlling High Blood Pressure: Million Hearts

- New measure for I/T/U programs for 2014

Numerator:	Patients with BP less than 140/90
Denominator:	User Population patients ages 18 through 85 years diagnosed with hypertension and no documented history of ESRD or current diagnosis of pregnancy

- FY 2014 Target: Baseline

FY 2014 Targets

FY 2014 Targets

FY 2014 Targets (Federal, Tribal, & Urban Programs) DIABETES	Final 2014 Target
Good Glycemic Control	48.3%
Controlled BP <140/90	64.6%
LDL Assessed	73.9%
Nephropathy Assessed	Baseline
Retinopathy Exam	58.6%
DENTAL	
Dental: General Access	29.2%
Sealants	13.9%
Topical Fluoride	26.7%
IMMUNIZATIONS	
Influenza 65+	69.1%
Pneumovax 65+	Baseline
Childhood IZ	74.8%
PREVENTION	
Pap Screening	Baseline
Mammogram Screening	54.7%
Colorectal Cancer Screening	35.0%
Tobacco Cessation	45.7%
Alcohol Screening (FAS Prevention)	65.9%
DV/IPV Screening	64.1%
Depression Screening	66.9%
Comp. CVD-Related Assessment	51.0%
Prenatal HIV Screening	89.1%
Breastfeeding Rates	29.0%
Controlling High Blood Pressure – Million Hearts	Baseline

GPRA Resources/Training Opportunities

GPRA Resources/Trainings:

- **CRS (Clinical Reporting System) website:** http://www.ihs.gov/crs/

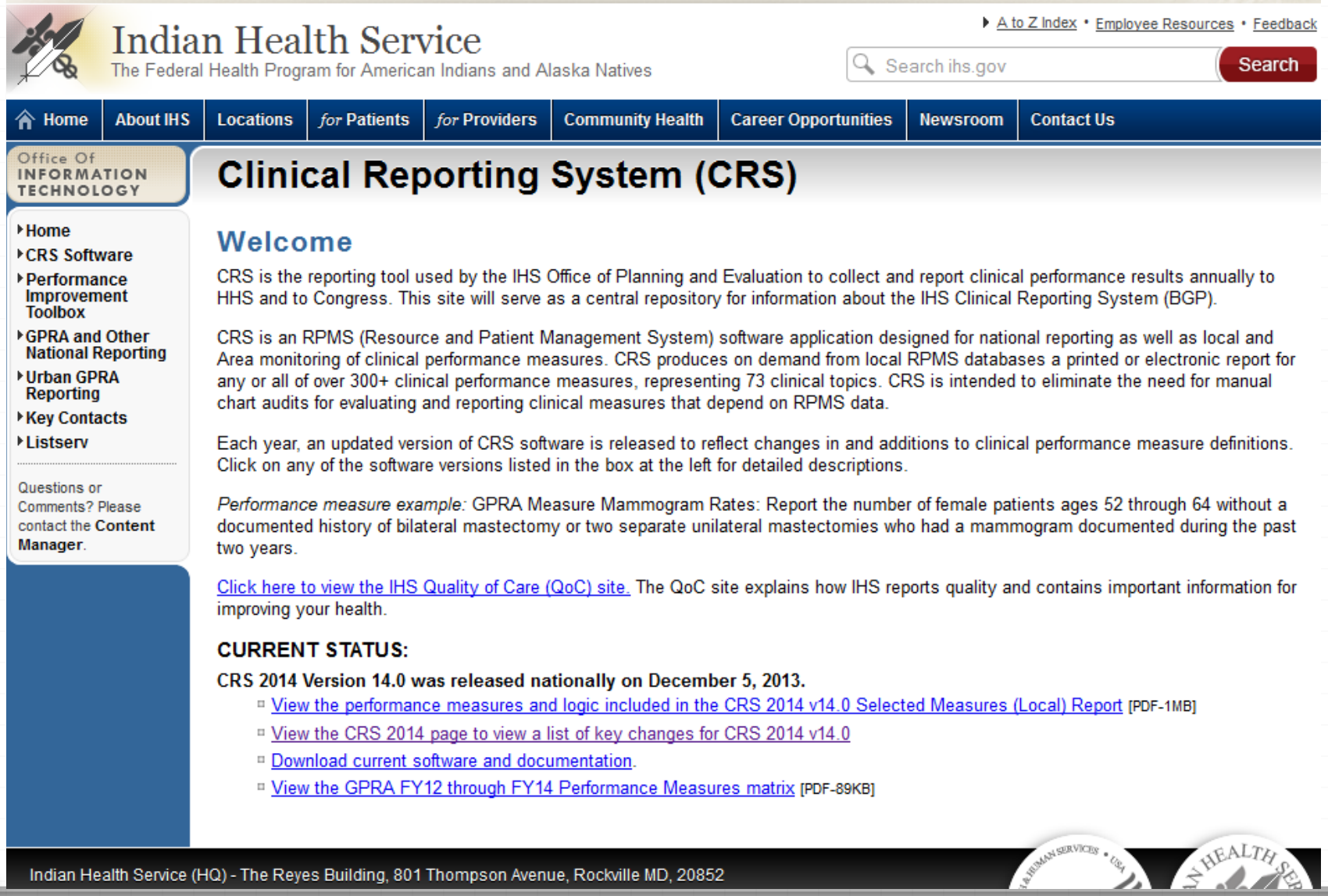
- **California Area Indian Health Service website:** http://www.ihs.gov/california

- **CA Area GPRA Portal:** http://www.ihs.gov/california/index.cfm/member-portal/california-area-gpra-gprama/

- **CRS 14.0 Training Webinar (recorded):** http://ihs.adobeconnect.com/p8b7xj2e1i2/

- **Provider Engagement in GPRA (recorded):** http://ihs.adobeconnect.com/p97h5xrxd9x/

CRS Website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CRS Software
Performance Improvement Toolbox
GPRA and Other National Reporting
Urban GPRA Reporting
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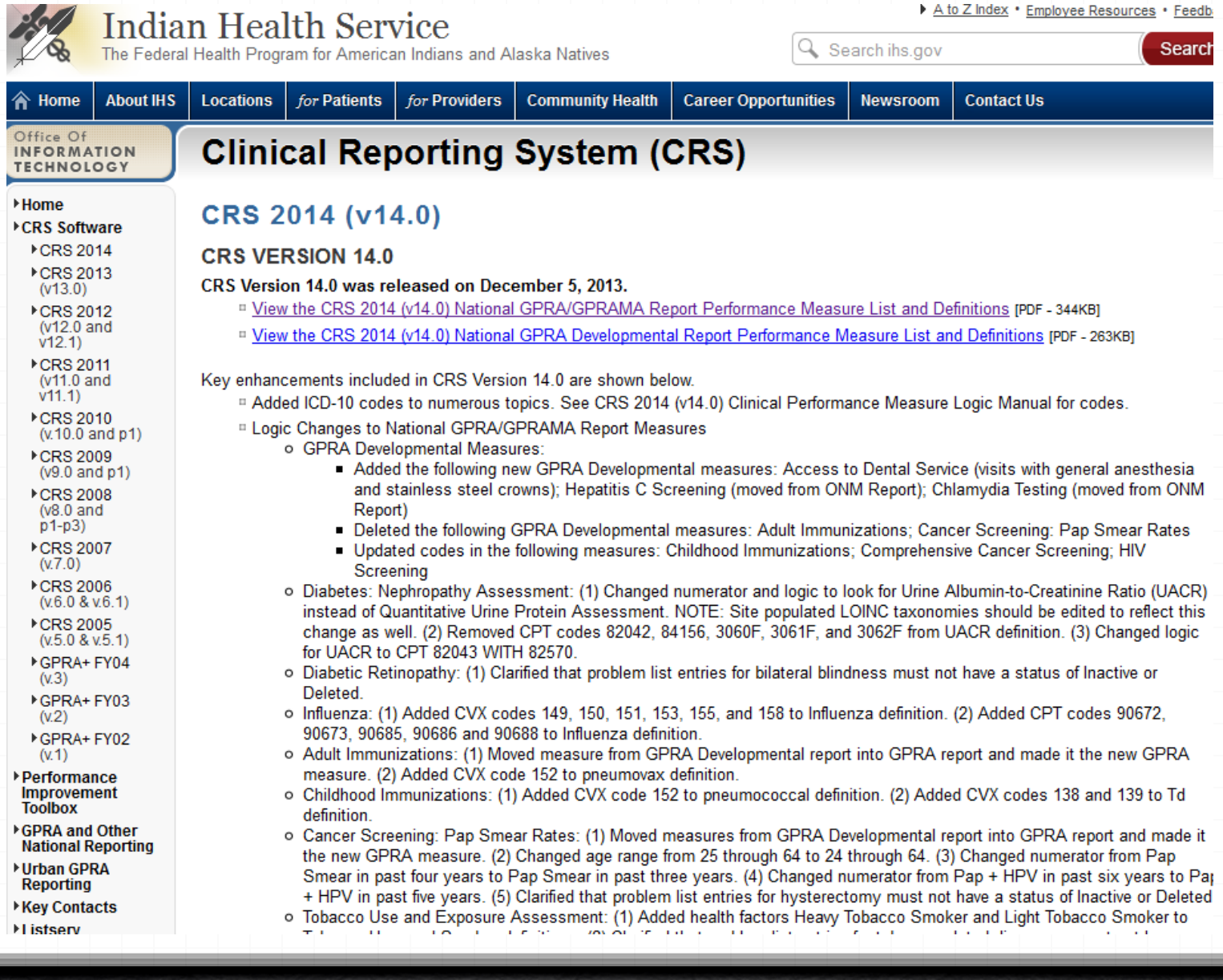
Listserv
Questions or Comments? Please contact the Content Manager.
Clinical Reporting System (CRS)
Welcome
CRS is the reporting tool used by the IHS Office of Planning and Evaluation to collect and report clinical performance results annually to HHS and to Congress. This site will serve as a central repository for information about the IHS Clinical Reporting System (BGP).
CRS is an RPMS (Resource and Patient Management System) software application designed for national reporting as well as local and Area monitoring of clinical performance measures. CRS produces on demand from local RPMS databases a printed or electronic report for any or all of over 300+ clinical performance measures, representing 73 clinical topics. CRS is intended to eliminate the need for manual chart audits for evaluating and reporting clinical measures that depend on RPMS data.
Each year, an updated version of CRS software is released to reflect changes in and additions to clinical performance measure definitions. Click on any of the software versions listed in the box at the left for detailed descriptions.
Performance measure example: GPRA Measure Mammogram Rates: Report the number of female patients ages 52 through 64 without a documented history of bilateral mastectomy or two separate unilateral mastectomies who had a mammogram documented during the past two years.
Click here to view the IHS Quality of Care (QoC) site. The QoC site explains how IHS reports quality and contains important information for improving your health.
CURRENT STATUS:
CRS 2014 Version 14.0 was released nationally on December 5, 2013.
View the performance measures and logic included in the CRS 2014 v14.0 Selected Measures (Local) Report [PDF-1MB]
View the CRS 2014 page to view a list of key changes for CRS 2014 v14.0
Download current software and documentation.
View the GPRA FY12 through FY14 Performance Measures matrix [PDF-89KB]
Indian Health Service (HQ) - The Reyes Building, 801 Thompson Avenue, Rockville MD, 20852

CRS Website (cont)



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Office Of INFORMATION TECHNOLOGY

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  - CRS 2009 (v9.0 and p1)
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Clinical Reporting System (CRS)

CRS 2014 (v14.0)

CRS VERSION 14.0

CRS Version 14.0 was released on December 5, 2013.

- View the CRS 2014 (v14.0) National GPRA/GPRAMA Report Performance Measure List and Definitions [PDF - 344KB]
- View the CRS 2014 (v14.0) National GPRA Developmental Report Performance Measure List and Definitions [PDF - 263KB]

Key enhancements included in CRS Version 14.0 are shown below.

- Added ICD-10 codes to numerous topics. See CRS 2014 (v14.0) Clinical Performance Measure Logic Manual for codes.
- Logic Changes to National GPRA/GPRAMA Report Measures
  - GPRA Developmental Measures:
    - Added the following new GPRA Developmental measures: Access to Dental Service (visits with general anesthesia and stainless steel crowns); Hepatitis C Screening (moved from ONM Report); Chlamydia Testing (moved from ONM Report)
    - Deleted the following GPRA Developmental measures: Adult Immunizations; Cancer Screening: Pap Smear Rates
    - Updated codes in the following measures: Childhood Immunizations; Comprehensive Cancer Screening; HIV Screening
  - Diabetes: Nephropathy Assessment: (1) Changed numerator and logic to look for Urine Albumin-to-Creatinine Ratio (UACR) instead of Quantitative Urine Protein Assessment. NOTE: Site populated LOINC taxonomies should be edited to reflect this change as well. (2) Removed CPT codes 82042, 84156, 3060F, 3061F, and 3062F from UACR definition. (3) Changed logic for UACR to CPT 82043 WITH 82570.
  - Diabetic Retinopathy: (1) Clarified that problem list entries for bilateral blindness must not have a status of Inactive or Deleted.
  - Influenza: (1) Added CVX codes 149, 150, 151, 153, 155, and 158 to Influenza definition. (2) Added CPT codes 90672, 90673, 90685, 90686 and 90688 to Influenza definition.
  - Adult Immunizations: (1) Moved measure from GPRA Developmental report into GPRA report and made it the new GPRA measure. (2) Added CVX code 152 to pneumovax definition.
  - Childhood Immunizations: (1) Added CVX code 152 to pneumococcal definition. (2) Added CVX codes 138 and 139 to Td definition.
  - Cancer Screening: Pap Smear Rates: (1) Moved measures from GPRA Developmental report into GPRA report and made it the new GPRA measure. (2) Changed age range from 25 through 64 to 24 through 64. (3) Changed numerator from Pap Smear in past four years to Pap Smear in past three years. (4) Changed numerator from Pap + HPV in past six years to Pap + HPV in past five years. (5) Clarified that problem list entries for hysterectomy must not have a status of Inactive or Deleted
  - Tobacco Use and Exposure Assessment: (1) Added health factors Heavy Tobacco Smoker and Light Tobacco Smoker to

GPRA/GPRAMA Measure List and Definitions Document

- List of Active Immunization Package patients ages 19 through 35 months who have not received the 4:3:1:3*:3:1:4 combination (four DTaP, three Polio, one MMR, three or four HiB, three Hep B, one Varicella, and four Pneumococcal). If a patient did not have all doses in a multiple dose vaccine, the IZ will not be listed. For example, if a patient only had two DTaP, no IZ will be listed for DTaP.

2.4 Cancer Screening Group

2.4.1 Cancer Screening: Pap Smear Rates

2.4.1.1 Owner and Contact

Carolyn Aoyama

2.4.1.2 National Reporting

NATIONAL (included in IHS Performance Report; reported to OMB and Congress)

2.4.1.3 Denominators

1. GPRA: Female Active Clinical patients ages 24 through 64 without a documented history of hysterectomy.

> **Note:** Patients must be at least 24 years of age at the beginning of the report period and less than 65 years of age as of the end of the report period.

2.4.1.4 Numerators

2. GPRA: Patients with a Pap smear documented in the past 3 years, or if patient is 30 to 64 years of age, either a Pap Smear documented in the past 3 years or a Pap Smear and an HPV DNA documented in the past 5 years.

> **Note:** This numerator does *not* include refusals.

A. Patients ages 24-29 with a Pap Smear documented in the past 3 years.

B. Patients ages 30 - 64 with a Pap Smear documented in the past 3 years.

C. Patients ages 30 - 64 with a Pap Smear documented 3 to 5 years ago and an HPV DNA documented in the past 5 years.

IHS Clinical Reporting System Version 14.0

2.4.1.5 Definitions

Age

Age of the patient is calculated at the beginning of the report period. Patients must be at least 24 years of age at the beginning of the report period and less than 65 years of age as of the end of the report period.

Hysterectomy

Defined as any of the following ever:

- Procedure ICD-9: 68.4 through 68.9; ICD-10: 0UT9*ZZ
- CPT 51925, 56308 (old code), 58150, 57540, 57545, 57550, 57555, 57556, 58152, 58200 through 58294, 58548, 58550 through 58554, 58570 through 58573, 58951, 58953 through 58954, 58956, 59135
- Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted) ICD-9: 618.5, 752.43, V67.01, V76.47, V88.01, V88.03; ICD-10: N99.3, Z12.72, Z90.710 through Z90.712, Q51.5
- Women's Health procedure called Hysterectomy

Pap Smear

- Lab PAP SMEAR
- POV ICD-9: V76.2 Screen Mal Neop-Cervix, V72.32 Encounter for Pap Cervical Smear to Confirm Findings of Recent Normal Smear Following Initial Abnormal Smear, 795.0*; ICD-10: R87.61*, R87.810, R87.820, Z01.42
- Procedure ICD-9: 91.46
- CPT 88141 through 88167, 88174 through 88175, G0123, G0124, G0141, G0143 through G0145, G0147, G0148, P3000, P3001, Q0091 Screening Pap Smear
- Women's Health procedure called Pap Smear and where the result does not have "ERROR/DISREGARD"
- LOINC taxonomy
- Site-populated taxonomy BGP GPRA PAP SMEAR TAX

HPV DNA

- Lab HPV
- POV ICD-9: V73.81, 079.4, 796.75, 795.05, 795.15, 796.79, 795.09, 795.19; ICD-10: B97.7, R85.618, R85.81, R85.82, R87.628, R87.810, R87.811, R87.820, R87.821, Z11.51
- CPT 87620 through 87622

CRS Website (cont)

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Questions or Comments? Please contact the **Content Manager**.

Clinical Reporting System (CRS)

Performance Improvement Toolbox

To assist in improving GPRA/GPRAMA performance, below is a list of resource materials that can be adapted for use at your program

CLINICAL GPRA MEASURE INFORMATION

- Colorectal Cancer Screening Information for Providers [PDF - 267KB]
- Comprehensive CVD Screening Information for Providers [PDF - 2MB]
- Depression Screening Information for Providers [PDF - 574KB]
- Domestic (Intimate Partner) Violence Screening Information for Providers [PDF - 360KB]
- Mammography Screening Information for Providers [PDF - 270KB]
- Prenatal HIV Screening Information for Providers [PDF - 1.2MB]
- Tobacco Screening and Cessation Intervention Information for Providers [PDF - 665KB]
- Improve GPRA Commercial Tobacco Treatment Interventions [PDF - 1MB]
- Achieving Meaningful Use and GPRA - Tobacco Use and Exposure [PDF - 1.1MB]

SCREENING TOOLS AND GUIDELINES FOR GPRA MEASURES

- FAQs: Clinical Performance Measurement, GPRA, and CRS [PDF - 117KB]
- Clinical Cheat Sheet [PDF - 3.0MB]
- Clinical Cheat Sheet for EHR Users [PDF - 1.4MB]
- FAQs: Infant Feeding Choice [PDF - 360KB]
- Collection of Breastfeeding Data at Pediatric Visits with the PCC Form at PIMC [PDF - 1.3MB]
- Infant Feeding Choice Screening Information for Breastfeeding Rates Measure [PDF - 191KB]
- CRS Childhood Immunizations Measure Information [PDF - 507KB]
- National Documentation of Tobacco Screening and Cessation Intervention [PDF - 144KB]
- Cherokee Indian Hospital's Documentation of Tobacco Screening and Cessation Intervention [PDF - 188KB]
- PHQ-2 Depression Screening Tool [PDF - 194KB]
- PHQ-9 Depression Screening Tool [PDF - 698KB]
- IHS Prenatal HIV Screening and Consent Procedures [PDF - 92KB]
- IHS Prenatal Health Assessment (Form 866) [PDF - 50KB]
- GPRA Handout for Patients [PDF - 78KB]
- GPRA Handout for Providers [PDF - 982KB]

Data Entry Cheat Sheets

Performance Measure	Standard	Provider Documentation	How to Enter Data in EHR
Dental Sealants	Patients should have one or more intact dental sealants. NOTE: Refusals are not counted toward the GPRA measure, but should still be documented.	**Standard EHR documentation for tests performed at the facility, ask about off-site *tests and record historical information* in EHR:** Date received Location Results	Dental Sealants (ADA) *ADA codes cannot be entered into EHR.* Dental Sealants CPT Visit Services Entry **(includes historical CPTs)** **Enter CPT: D1351, D1352** **Quantity:** **Modifier:** **Modifier 2:**
Topical Fluoride	Patients should have one or more topical fluoride applications. NOTE: Refusals are not counted toward the GPRA measure, but should still be documented.	**Standard EHR documentation for tests performed at the facility, ask about off-site tests and record historical information in EHR:** Date received Location Results	Topical Fluoride (ADA code) *ADA codes cannot be entered into EHR.* Topical Flouride CPT Visit Services Entry **(includes historical CPTs)** **Enter CPT: D1206, D1208, D5986** **Quantity:** **Modifier:** **Modifier 2:** Topical Flouride POV Visit Diagnosis Entry **Purpose of Visit: ICD-9: V07.31** **Provider Narrative:** **Modifier:** **Cause of DX:**

Data Entry Cheat Sheets

CPT codes are entered in the **Visit Services** component, which is located on the **Services** tab.

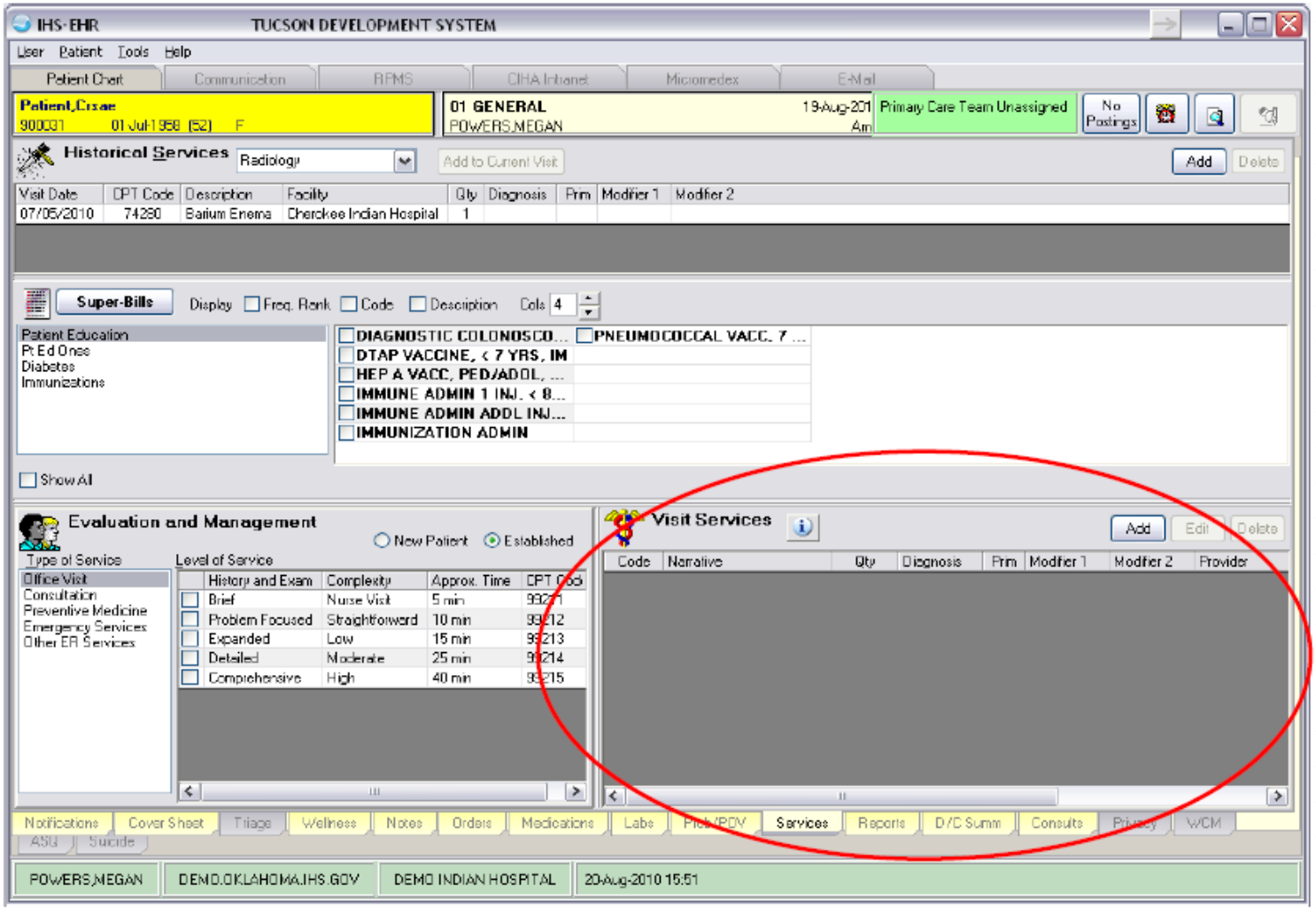

Figure A- 8: Visit Services component

California Area GPRA/GPRAMA Portal

California Area GPRA/GPRAMA Portal

California Area
INDIAN HEALTH SERVICE

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- National GPRA / GPRAMA (for AREA GPRA Coordinators)
- Dental
- California Area GPRA / GPRAMA
- CAO Portal System Tour
- Site Manager's Portal

CA Member Portals

We are pleased to present this members-only portal to facilitate collaboration and communication on a level more inclusive to our clientele. Our office will soon be offering more portals for other clinical and technical disciplines in the near future. To register as a new user, click on the link below to submit your request for access to the new RPMS Site Managers portal.

National GPRA / GPRAMA (for AREA GPRA Coordinators)

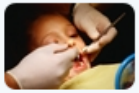
This portal is intended for Area GPRA Coordinators & GPRA Measure Leads.

Read More ›

California Area GPRA / GPRAMA

This portal will allow you to access to information, resources, and a community of people interested in GPRA/GPRAMA in the CA Area.

Read More ›



Dental

This portal will allow you to access to information, resources, and a community of people interested in Dental in the CA Area.

Read More ›

CAO
View Video

CAO Portal System Tour

A quick tour around the California Area Indian Health Service Portal System

Read More ›

RPMS EHR

Site Manager's Portal

A portal community designed to collaborate with California's RPMS Site Manager's, EHR CAC's and tribal / urban health program technical staff.

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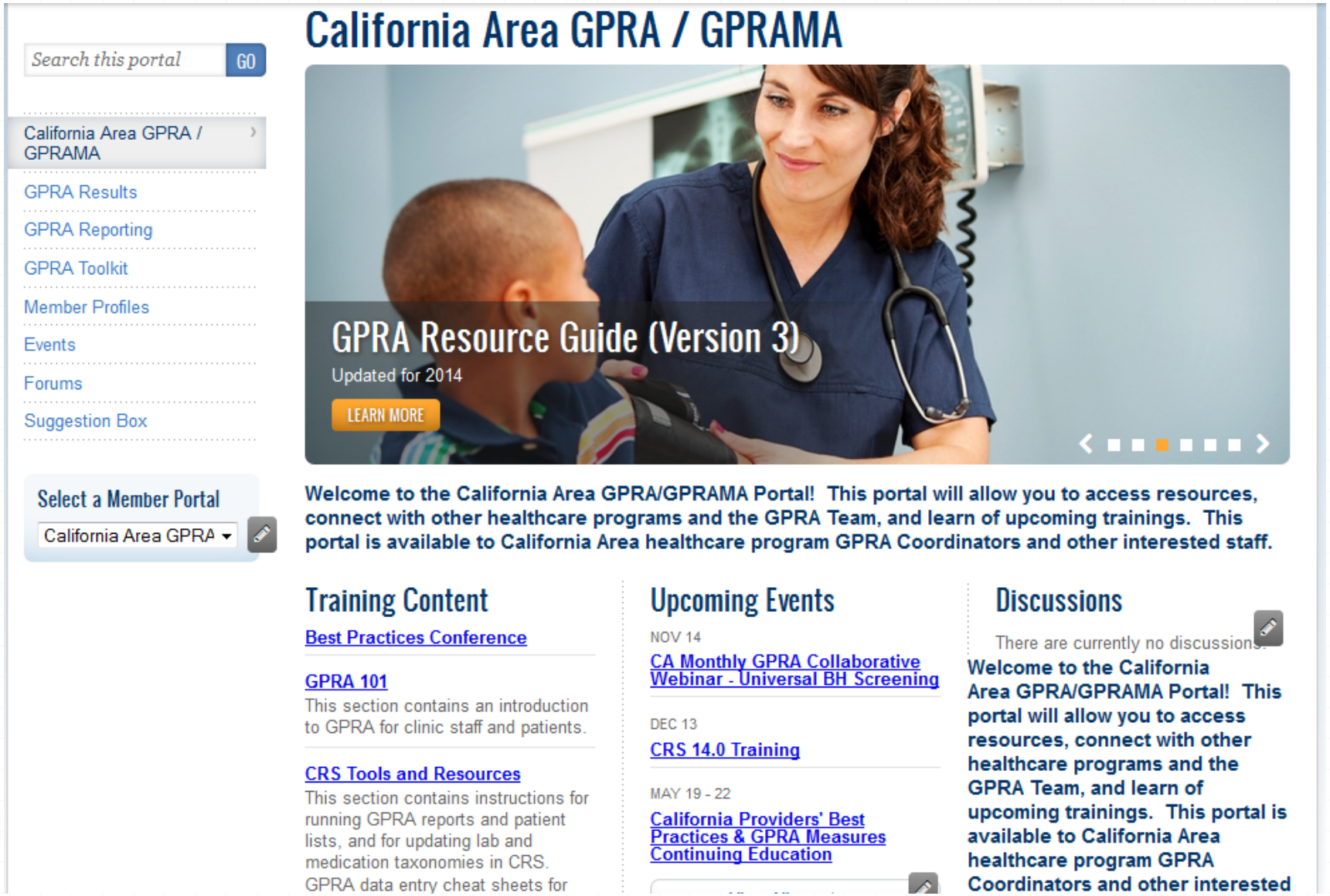
California Area GPRA/GPRAMA Portal



California Area GPRA/GPRAMA Portal

California Area
INDIAN HEALTH SERVICE

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GPRA Toolkit

This section contains GPRA/GPRAMA resources for new and experienced staff. You will find information related to CRS and specific GPRA/GPRAMA measures, as well as shared resources from California Area tribal and urban Indian healthcare programs.

GPRA 101

This section contains an introduction to GPRA for clinic staff and patients.

Read More ›

CRS Tools and Resources

This section contains instructions for running GPRA reports and patient lists, and for updating lab and medication taxonomies in CRS. GPRA data entry cheat sheets for EHR and PCC are also included in this section.

Read More ›

National GPRA Webinars

Read More ›

GPRA Improvement Challenges

This section contains information on current GPRA improvement challenges hosted by the IHS/CAO.

Read More ›

CA Area GPRA Monthly Webinars

This section contains recorded monthly webinars hosted by the GPRA team.

Read More ›

Best Practices Conference

Read More ›

Screening Tools and Other Clinic Resources

This section contains tools for Prenatal HIV Screening, behavioral health screening, tobacco use screening, and other clinical tools shared by California Area Indian health programs.

Read More ›

2013-2014 Monthly GPRA Collaborative Webinars

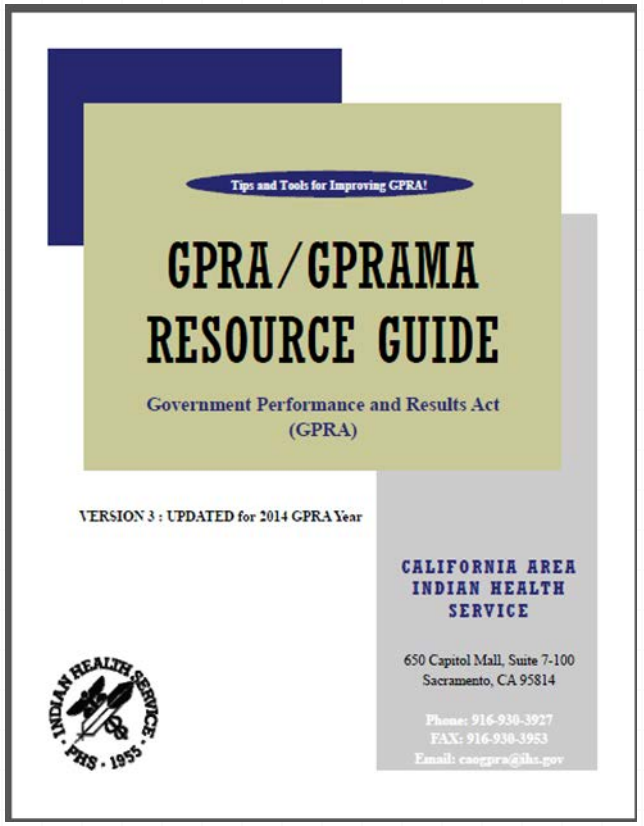
2nd Thursday of each month from 12:00 – 1:00 P.M.

- September 12, 2013
- October 10, 2013 (cancelled due to shutdown)
- November 14, 2013 - Universal Screening
- December 12, 2013 (cancelled)
- January 9, 2014 – Dental Sealant and Fluorides
- February 13, 2014 – Comprehensive CVD Assessment
- March 12, 2014
- April 10, 2014 – Diabetes: Retinopathy Screening
- May 8, 2014 (cancelled due to BP Conference)
- June 12, 2014

Underlined dates are quarterly GPRA Coordinator Webinars.
All other dates are monthly GPRA Collaborative Webinars.

GPRA/GPRAMA Resource Guide

- Version 3.0 – updated for FY 2014
- Now available for download on GPRA Portal on CAO Website
- Contains new tips, tools, and resources for improving GPRA



Clinical Reporting System (CRS)

Clinical Reporting System (CRS) Reports:

- National GPRA/GPRAMA Report
- National GPRA/GPRAMA Patient List
- GPRA/GPRAMA Forecast Report
- GPRA/GPRAMA Dashboard
- Taxonomy Reports

National GPRA/GPRAMA Report

Diabetes: Blood Pressure Control

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts (GPRA)	148		99			87		
# w/ BPs Documented	118	79.7	77	77.8	+2.0	72	82.8	-3.0
# w/Controlled BP <140/90 (GPRA)	61	41.2	38	38.4	+2.8	34	39.1	+2.1

Diabetes: Blood Pressure Control								
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GPRA/GPRAMA Dashboard

CI14→RPT→NTL→DSH

Dashboard Report - DEMO INDIAN CLINIC						
	National 2013 Target	2012 Final	Numerator	Denominator	2013*	# Needed to Achieve Target
Good Glycemic Control <8	Baseline	0	0	0	0	N/A
Controlled BP <140/90	Baseline	0	0	0	0	N/A
LDL Assessed	68	0	0	0	0	0
Nephropathy Assessed	64.2	0	0	0	0	0
Retinopathy Assessed	56.8	0	0	0	0	0
Dental Access General	26.9	4.8	0	14	0	4
Sealants	Baseline	0	0	3	0	N/A
Topical Fluoride	Baseline	0	0	3	0	N/A
Influenza 65+	62.3	0	0	1	0	1
Pneumovax Ever 65+	84.7	100	1	1	100	0

Note: All patients are demo patients from a demo database.

National GPRA/GPRAMA Patient List

CI14→RPT→NTL→LST

Diabetes: Blood Pressure Control

List of diabetic patients who had their BP assessed.

UP=User Pop; AC=Active Clinical; AD=Active Diabetic; AAD=Active Adult Diabetic
PREG=Pregnant Female; IMM=Active IMM Pkg Pt; IHD=Active Ischemic Heart Disease

CHD=Active Coronary Heart Disease; HR-High Risk Patient

PATIENT NAME	HRN	COMMUNITY	SEX	AGE	LAST MEDICAL VISIT	LAST VISIT	DENOMINATOR	NUMERATOR
JOHNSON,CELIA KAY	105161	BRAGGS	F	37	8/1/2011	9/1/2011	UP,AD,AAD	131/77 UNC
PATIENT,CRSAC	900029	BRAGGS	F	44	8/2/2011	8/2/2011	UP,AD,AAD	2000F UNC
BILBY,DEBORA ELLEN	108341	BRAGGS	F	45	12/8/2011	12/16/2011	UP,AD,AAD	133/82 UNC
BUNKER,EDITH	656723	BRAGGS	F	47	12/14/2011	12/14/2011	UP,AD,AAD	133/86 UNC
SHATWELL,TARA MARIE	111313	BRAGGS	F	51	12/30/2011	12/30/2011	UP,AD,AAD	201/87 UNC
NOFIRE,BOBBIE SUE	119298	BRAGGS	F	52	12/4/2011	12/18/2011	UP,AD,AAD	138/66 UNC
SKINNER,KERRY NADINE	112866	BRAGGS	F	61	12/17/2011	12/29/2011	UP,AD,AAD	159/86 UNC
JACKSON,SHERRY LADAWN	100939	BRAGGS	F	68	12/31/2011	12/31/2011	UP,AD,AAD	3074F/3080F UNC
HARVELL,JONELLE LADAWN	114258	BRAGGS	F	69	11/21/2011	12/9/2011	UP,AD,AAD	127/58 CON
PIGEON,PAULINE	103058	BRAGGS	F	70	11/2/2011	12/17/2011	UP,AD	132/69 UNC

Note: All patients are demo patients from a demo database.

GPRA/GPRAMA Forecast Patient List

Appt Time	Patient Name	HRN	Sex	DOB	Community
GPRA Measure Not Met	Date of Last Screening and Next Due Date Tests Counted for GPRA Measure				
3:26 am	ERTER,RYDER KANE	202214	M	02/03/80	SALLISAW
Annual Dental Exam (All Patients)	Last Dental Exam: 06/05/12 Overdue as of: 06/05/13 GPRA counts visits with ADA 0000 or 0190, PCC Exam 30, POV V72.2, Z01.20, or Z01.21 or any CHS visit with any ADA code during 7/1/13-6/30/14				
Depression Screen	Last Depression Screen: Never Overdue as of: 01/01/13 GPRA counts PCC Exam 36, POV V79.0, BHS problem code 14.1, PCC or BHS V Measurement PHQ2 or PHQ9, or 2 mood disorder visits during 7/1/13-6/30/14				

Taxonomy Reports

Recommend that you check medication and lab taxonomies at least once every 6 months:

- Lab taxonomies: check with lab clinic uses to get specific lab test names for each taxonomy
- Medication taxonomies: check with providers and pharmacy to get drug names for each taxonomy

To check medication and lab taxonomies:

CRS→CI14→RPT→TAX

To edit medication and lab taxonomies:

CRS→CI14→SET→TS

Additional Tips

- What if my results don't look correct?
  - Run a patient list in CRS of all patients not meeting the measure in question
  - Do chart audits to make sure those patients actually did not receive test/screening
  - Check the National GPRA & PART Report Performance Measure List and Definitions document to be sure the code you are using actually counts for GPRA
  - Use Data Entry Cheat sheet to ensure data is entered into RPMS in the correct way to count for GPRA
  - Check medication and lab taxonomies for accuracy and completeness

GPRA Improvement Strategies

NGST

Prenatal HIV Screening

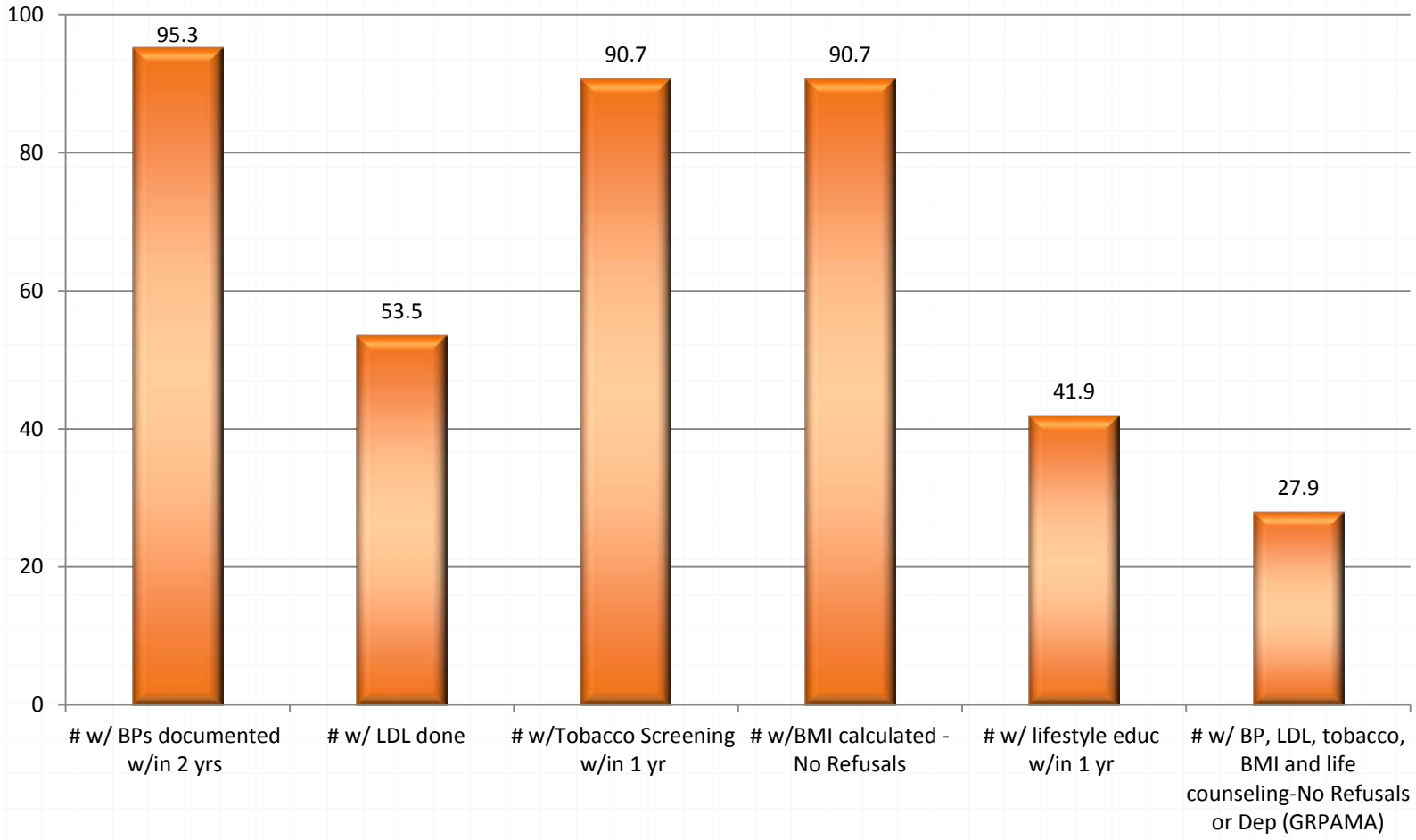
- Screen for HIV as soon as patient receives positive pregnancy test, before they are referred out
- If patient is referred out for prenatal care, contact outside provider to obtain HIV test results
- Confirm pregnancy resulted in birth
  - If pregnancy was ended due to abortion or miscarriage, document this in chart

Comprehensive CVD Assessment

- Run patient lists to determine which components CHD patients are missing
- Monitor each component of numerator to determine which component(s) is/are resulting in measure not being met

Comprehensive CVD-Related Assessment		
	REPORT PERIOD	%
Active CHD Pts 22+ (GPRAMA)	195	
# w/ BPs documented w/in 2 yrs	186	95.3
# w/ LDL done	104	53.5
# w/Tobacco Screening w/in 1 yr	177	90.7
# w/BMI calculated -No Refusals	177	90.7
# w/ lifestyle educ w/in 1 yr	82	41.9
# w/ BP, LDL, tobacco, BMI and life counseling-No Refusals or Dep (GRPAMA)	54	27.9

Comprehensive CVD Assessment (cont.)



Retinopathy Exam

- Run patient lists to determine who needs retinopathy exam and contact patients to schedule appointment
- Utilize EHR reminders
- Utilize iCare
- Maintain extended clinic hours for ophthalmology
- Hold monthly case management meetings with DM team
- Take photos at clinic and utilize tele-health optometry services to have pictures analyzed
- Provide training to multiple staff on use of retinopathy screening cameras

BH Screening (Depression, DV/IPV, Alcohol)

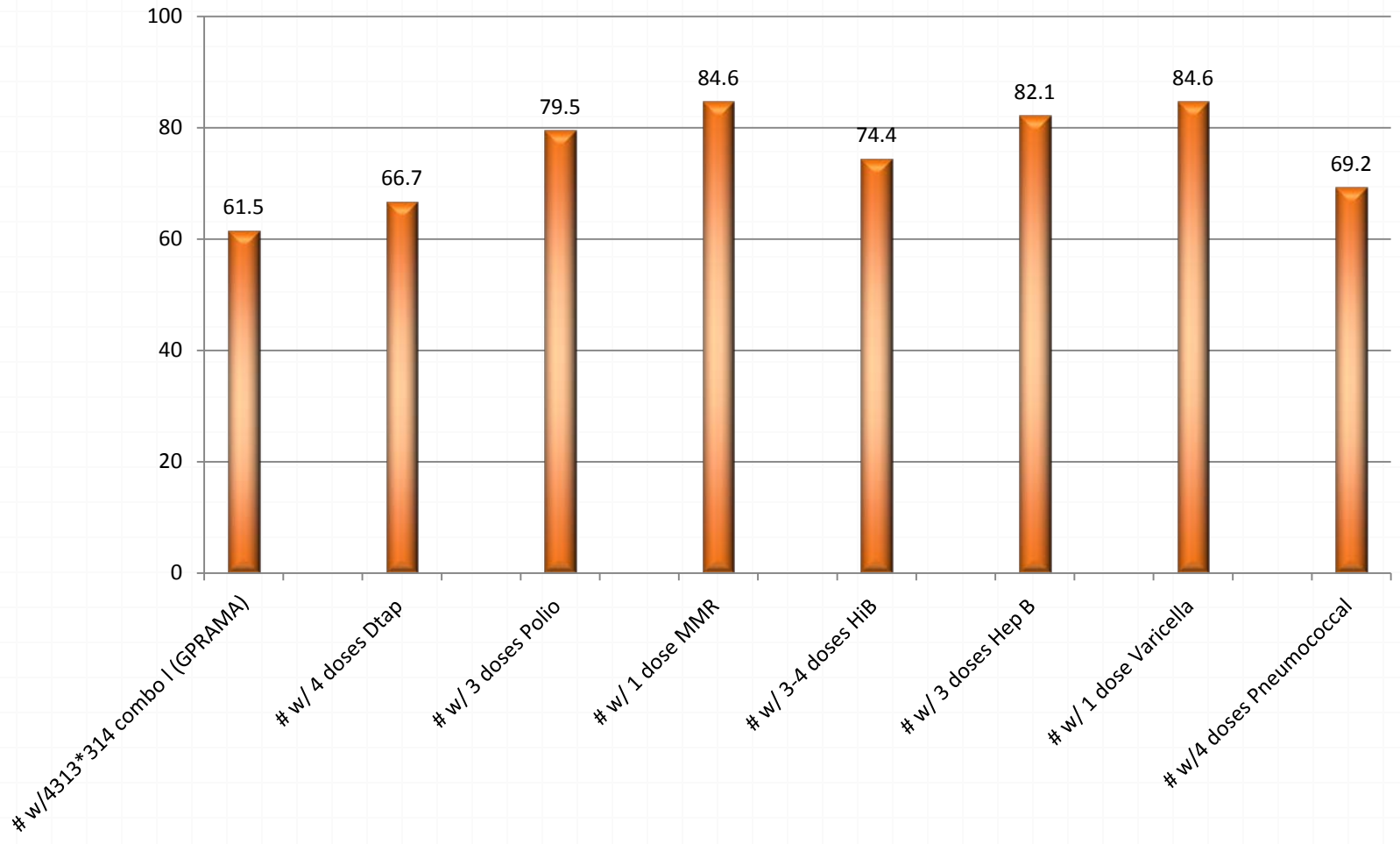
- Implement Universal Behavioral Health Screening
  - Screen every patient at every visit for depression, DV/IPV, and alcohol use
  - Exception: high utilizers (some clinics screen these patients monthly)
- Utilize EHR
  - Reminders
  - Behavioral Health screening dialogues
- Provide training to staff on asking BH screening questions

Childhood Immunizations

- Run patient lists to determine which patients are missing vaccines, contact those patients
- Obtain data from immunization registries for patients who received vaccines elsewhere
- Monitor each immunization to determine which vaccine(s) is/are causing the lower rates

Childhood Immunizations		
	REPORT PERIOD	%
Active Imm Pkg Pts 19-35 mos (GPRAMA)	75	
# w/4313*314 combo or w/ Dx/ Contraind/ NMI Refusal (GPRAMA)	46	61.5
# w/ 4 doses Dtap or w/ Dx/ Contraind/ NMI Refusal	50	66.7
# w/ 3 doses Polio or w/ Dx/ Contraind/ NMI Refusal	60	79.5
# w/ 1 dose MMR or w/ Dx/ Contraind/ NMI Refusal	63	84.6
# w/ 3-4 doses HiB or w/ Contraind/ NMI Refusal	56	74.4
# w/ 3 doses Hep B or w/ Dx/Contraind/ NMI Refusal	62	82.1
# w/ 1 dose Varicella or w/ Dx/Contraind/ Refusal	63	84.6
# w/4 doses Pneumococcal or w/Dx/ Contraind/ NMI Refusal	52	69.2

Childhood Immunizations (cont.)



Influenza 65+

- Utilize EHR reminders and CRS patient lists
- Host vaccination clinics
- Utilize outreach department to conduct flu clinics in community
- Send mass mailings to educate patients on the importance of flu immunization and to remind them to get vaccinated
- Set up table outside front doors of clinic to offer flu shot as patients arrive
- Offer incentives for vaccinations
- Obtain and enter historical flu shot data for flu shots obtained outside the clinic

Colorectal Cancer Screening

- As of FY 2013, double contrast barium enema no longer counts towards meeting measure
  - Make sure this screening test is not being used by your clinic
- Utilize EHR reminders and CRS patient lists to determine who needs screened
- Obtain screening results back from outside providers for patients screened outside the clinic

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